



Chicago Flu Update



City of Chicago
Rahm Emanuel, Mayor

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Chicago Department of Public Health
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Influenza Activity

Influenza viruses continue to circulate in Chicago. However, activity is low and more influenza B than influenza A strains were detected during the week of March 10-16, 2013. For the past four weeks the percentage of specimens testing positive for influenza B has been higher than those testing positive for influenza A. Vaccination remains the best form of protection against influenza infections and is recommended as long as influenza virus is circulating in the community. Healthcare providers and retail pharmacies continue to have vaccine available. For those without healthcare providers or insurance, a complete [list of CDPH Immunization clinics](#)¹ is available on the City website and by calling 311.

Are severe cases of influenza occurring?

Suspected novel and variant influenza, pediatric influenza-associated deaths, influenza-associated ICU hospitalizations and outbreaks of influenza-like illness in a congregate setting should all be reported to CDPH via [INEDSS](#)². For the week of March 10-16, 2013 (week 11), **two influenza-associated ICU hospitalizations** were reported. This week last season, there were 10 reported ICU hospitalizations.

Since September 30, 2012, **173 influenza-associated ICU hospitalizations** have been reported (Figure 1). Among the total ICU hospitalizations reported, 166 (96%) were positive for influenza A (71 H3N2, 6 H1N1, and 89 not subtyped) and 7 were positive for influenza B. One-hundred three (60%) were female, 63 (36%) were African-American, and 130 (75%) were 50 years of age or older (median age of 64 years with a range between 8 months-97 years). Seventy (41%) had lung disease, 63 (37%) had cardiac disease and 40 (23%) required ventilator support. Sixteen deaths have been reported including one under 18 years of age. All were positive for influenza A (44% subtyped as H3N2 and 56% were not subtyped), 15 (94%) were 50 years of age or older, 69% were female, 62% were NH-White, and 56% had cardiac disease.

How much influenza-like illness is occurring?

CDPH receives data from over 50 surveillance sites across Chicago, which report the total number of patient visits per week, and of those visits, the number with influenza-like illness (ILI) (i.e., fever of 100°F or greater, with cough or sore throat). All hospitals in Chicago are required to report on a weekly basis the total number of emergency department visits, and of those visits, the number with ILI. For the week of March 10-16, 2013, with 13 hospitals reporting, **2.6%** of emergency department visits were due to ILI. Activity levels are the lowest reported since late November and remain lower than levels seen during the same week for the past two influenza seasons (Figure 2).

ESSENCE is an electronic syndromic surveillance system that utilizes emergency department chief complaint data submitted daily by participating Chicago hospitals. Currently, 8 Chicago hospitals submit data to ESSENCE. Figure 3 shows the percent of the total emergency department visits due to ILI for pediatric patients (2.6%) and adult patients (1.5%) for the week of March 10-16, 2013 plus the ILI activity by age group for the previous season. Pediatric and adult ILI levels remain lower than levels seen during the same week last season.

Figure 1. Number of influenza-associated intensive care unit hospitalizations reported for Chicago residents, for current season (2012-2013) and previous season (2011-2012), October-May.

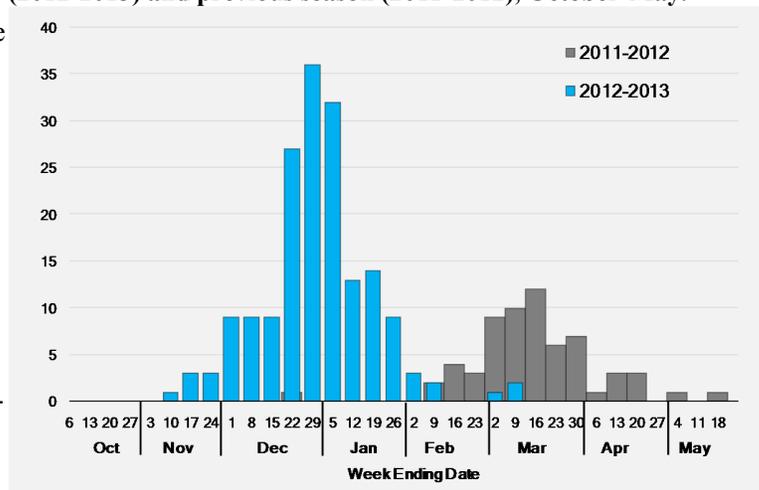
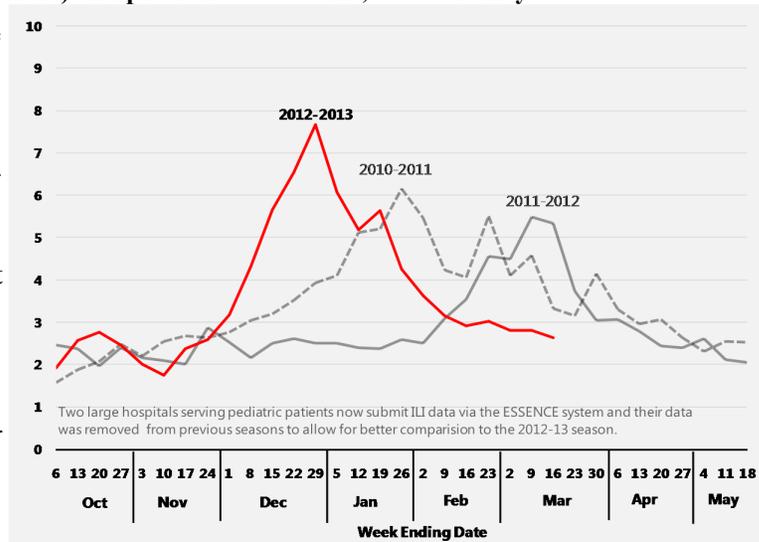


Figure 2. Percent of emergency department visits attributed to influenza-like illness based on manual reporting as determined by individual hospitals, Chicago, by week, for current season (2012-2013) and previous two seasons, October-May.



¹http://www.cityofchicago.org/city/en/depts/cdph/supp_info/clinical_health/immunizations_walk-inclinics.html; ²<https://dph.partner.illinois.gov/>

Several outpatient clinics and two large outpatient clinic networks located in Chicago participate in CDC's Influenza-like Illness Surveillance Network (ILINet) by reporting on the number of patients with ILI seen weekly. From March 10-16, 2013, with 34 outpatient clinics reporting, 4.4% of doctor's office visits were due to influenza-like illness. This is three percentage points lower than the peak reached in December. This week last season, peak ILI activity was reached (Figure 4).

Which influenza strains are circulating?

Data on influenza virus test results are reported by Chicago laboratories performing influenza subtyping. For the week of March 10-16, 2013, with 7 laboratories reporting, 33 of the 392 (8.4%) specimens tested for influenza were positive. This week last season, 24% of specimens tested positive for influenza. Among this week's positive specimens, 8 were typed as influenza A (5 H3N2 and 3 were not subtyped) and 25 typed as influenza B (Figure 5). Since September 2012, 1,482 of 10,784 (14%) specimens tested for influenza have been positive; 1,353 typed as influenza A (1,061 H3N2, 92 2009 H1N1, and 200 not subtyped) and 129 typed as influenza B.

Where can I get more information?

The Centers for Disease Control and Prevention's [FluView](#)³ report provides national updates and trends related to the intensity of influenza activity across the United States, as well as detailed information on antiviral resistance, severity of illness, and other topics. Updates specific to [Illinois](#)⁴ and [Suburban Cook County](#)⁵ are also available online. Current and archived issues of the *Chicago Flu Update* can be found on the CDPH website section [Current Flu Situation in Chicago](#)⁶.

National Snapshot (March 10-16, 2013)

Viral Surveillance: Of 5,526 specimens tested and reported by collaborating laboratories, 899 (16.3%) were positive for influenza.

Pneumonia and Influenza Mortality: The proportion of deaths attributed to pneumonia and influenza (P&I) was above the epidemic threshold.

Influenza-associated Pediatric Deaths: six pediatric deaths were reported.

Influenza-Associated Hospitalizations: A cumulative rate for the season of 40.6 laboratory-confirmed influenza-associated hospitalizations per 100,000 population was reported. Of reported hospitalizations, 51% were among adults 65 years and older.

Outpatient Illness Surveillance: The proportion of outpatient visits for influenza-like illness (ILI) was 2.2%. This is at the national baseline of 2.2%. Three of 10 regions reported ILI above region-specific baseline levels. One state experienced high ILI activity; 5 states experienced moderate activity; 6 states and New York City experienced low activity; 38 states experienced minimal activity, and the District of Columbia had insufficient data.

Geographic Spread of Influenza: Seven states reported widespread influenza activity; Puerto Rico and 8 states reported regional influenza activity; 26 states reported local influenza activity; 9 states reported sporadic influenza activity; Guam reported no influenza activity, and the U.S. Virgin Islands and the District of Columbia did not report.

Figure 3. Percent of emergency department visits attributed to influenza-like illness* based on chief complaint data submitted to ESSENCE, Chicago, by week, for current season (2012-2013) and previous season (2011-2012), October-May.

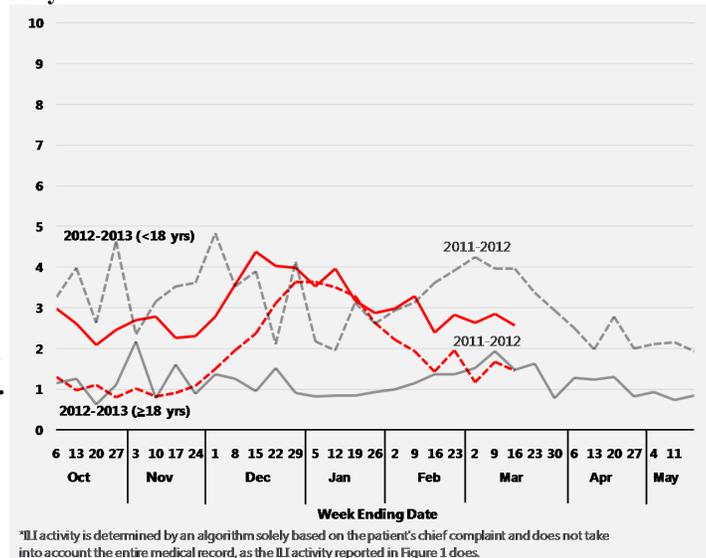


Figure 4. Percent of outpatient visits attributed to influenza-like illness, Chicago, by week, for current season (2012-2013) and previous two seasons, October-May.

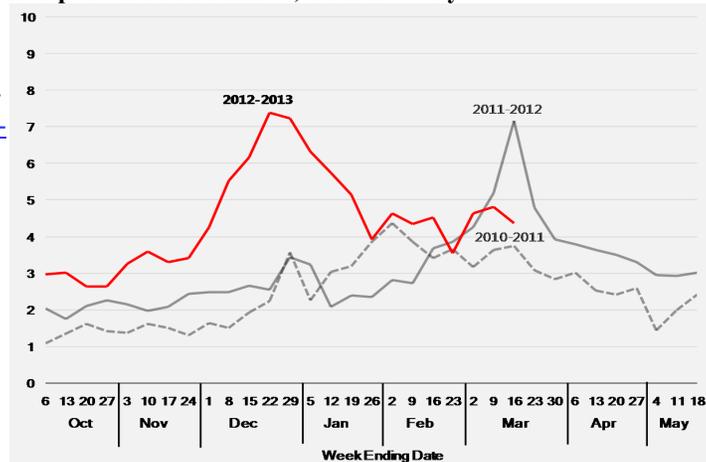
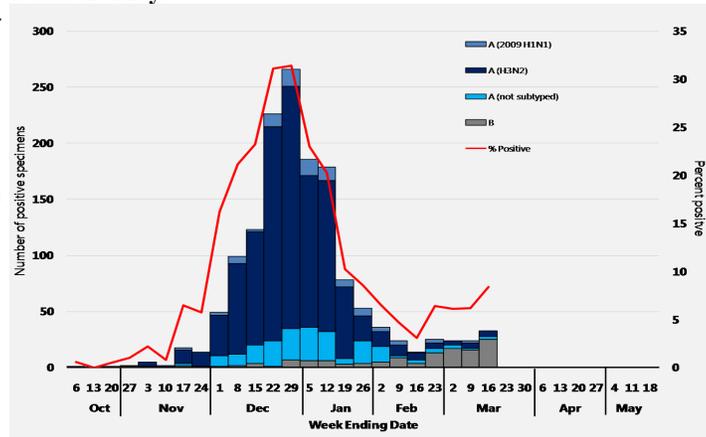


Figure 5. Percent of specimens testing positive (by RT-PCR) for influenza by subtype as reported by local laboratories serving Chicago hospitals, for the current season (2012-2013) October-May.



Report is preliminary and may change as additional data is received

³<http://www.cdc.gov/flu/weekly/index.htm>; ⁴<http://www.idph.state.il.us/flu/surveillance.htm>; ⁵<http://www.cookcountypublichealth.org/data-reports#Influenza>; ⁶http://www.cityofchicago.org/city/en/depts/cdp/supp_info/influenza/current_flu_situationinchicago2011.html